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County: Portage RIVER PINES CENTER 1800 SHERMAN AVENUE STEVENS POINT 54481 Phone: (715) 344-1800
Operated from 1/1 To 12/31 Days of Operation: 366
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/00): 174
Total Licensed Bed Capacity (12/31/00): 174
Number of Residents on 12/31/00: 139 Ownership:
Highest Level License:
Operate in Conjunction with CBRF?
Title 18 (Medicare) Certified? Corporati on Skilled Yes Yes Average Daily Census: 145 \*

Services Provided to Non-Residents		Age, Sex, and Primary Diagn	Length of Stay (12/31/00)	%			
Home Health Care Supp. Home Care-Personal Care	No No	Primary Diagnosis	%   	Age Groups	% 	Less Than 1 Year 1 - 4 Years	35. 3 43. 2
Supp. Home Care-Household Services Day Services	No Yes	Developmental Disabilities Mental Illness (Org./Psy)	5. 0 32. 4	Under 65 65 - 74	7. 9 12. 9	More Than 4 Years	21.6
Respite Care Adult Day Care	Yes No	Mental Illness (Other) Alcohol & Other Drug Abuse	3. 6 0. 0	75 - 84 85 - 94	29. 5 39. 6	********	100.0
Adult Day Health Care Congregate Meals	Yes No	Para-, Quadra-, Hemi pl egi c Cancer	0. 7 2. 9	95 & Over	10. 1	Full-Time Equivalen Nursing Staff per 100 Re	t si dents
Home Delivered Meals Other Meals	Yes No	Fractures Cardi ovascul ar	7. 9 12. 9	65 & 0ver	100. 0 92. 1	(12/31/00)	
Transportation Referral Service	No Yes	Cerebrovascul ar Di abetes	10. 8 11. 5	Sex		RNs LPNs	9. 8 4. 1
Other Services Provide Day Programming for	No	Respiratory Other Medical Conditions	7. 2 5. 0	Male	27. 3	Nursing Assistants Aides & Orderlies	34. 0
Mentally III Provide Day Programming for	No	vener mearear conditions	100. 0	Femal e	72. 7	mues a orderres	01. 0
Developmentally Disabled	No		******	· • • • • • • • • • • • • • • • • • • •	100.0	 	****

## Method of Reimbursement

		Medi (Ti tl			Medic (Title			0th	er	P	rivate	Pay		Manage	ed Care		Percent
			Per Die	n		Per Die	m		Per Die	m		Per Diem	ı	_	Per Diem	Total	Of All
Level of Care	No.	%	Rate	No	. %	Rate	No.	%	Rate	No	. %	Rate	No.	%	Rate	No.	Resi dents
Int. Skilled Care	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0%
Skilled Care	-		\$255. 17	69	77. 5	\$96. 27	ŏ	0. 0	\$0.00	21		\$140.00	-		\$103.00	11 <b>9</b>	85. 6%
Intermedi ate				19	21.3	\$69. 93	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	19	13. 7%
Limited Care				1	1. 1	\$69. 93	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	1	0. 7%
Personal Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Dev. Di sabl ed				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Traumatic Brain Inj	. 0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Depender		0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	21	100.0		89	100. 0		0	0.0		21	100.0		8	100.0		139	100.0%

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution	of Residents'	Condi ti o	ns, Services	s, and Activities as o	of 12/3	1/00
zewens zuring neperering rerreu				<b>%</b> ]	Needi ng			Total
Percent Admissions from:		Activities of	%		stance of	% Totally	N	umber of
Private Home/No Home Health	10.3	Daily Living (ADL)	Independent	One 0:	r Two Staff	Dependent	Re	esi dents
Private Home/With Home Health	0.0	Bathi ng	5. 0		38. 8	<sup>*</sup> 56. 1		139
Other Nursing Homes	1.5	Dressi ng	10. 1		36. 0	<b>54.</b> 0		139
Acute Care Hospitals	87. 3	Transferring	28. 8		33. 1	38. 1		139
Psych. HospMR/DD Facilities	0.0	Toilet Use	25. 2		35. 3	39. 6		139
Rehabilitation Hospitals	0. 0	Eati ng	69. 1		11. 5	19. 4		139
Other Locations	1.0	************	******	*****	******	·*****************	*****	*****
Total Number of Admissions	400	Continence	1 0 .1 .		Special Trea			<b>%</b>
Percent Discharges To:		Indwelling Or Externa	al Catheter	10. 8		Respiratory Care		6. 5
Private Home/No Home Health	25. 4	Occ/Freq. Incontinent		50. 4	Recei vi ng	Tracheostomy Care		0. 7
Private Home/With Home Health	22. 5	Occ/Freq. Incontinent	t of Bowel	50. 4		Suctioning		0. 7
Other Nursing Homes	2. 9	36 1 1 1 1 .				Ostomy Care		3. 6
Acute Care Hospitals	26. 2	Mobility	1	~ o	Recei vi ng	Tube Feeding	D: .	4. 3
Psych. Hosp MR/DD Facilities	0.0	Physically Restrained	1	7. 9	Recei vi ng	Mechanically Altered	Diets	32. 4
Rehabilitation Hospitals Other Locations	0.0	Cl.: - Como			Othon Doo!do	nt Chanastanistica		
Deaths	6. 3 16. 7	Skin Care With Pressure Sores		8. 6		ent Characteristics ace Directives		92. 1
Total Number of Discharges	10. /	With Rashes			Medications	ice Directives		92. 1
(Including Deaths)	413	with nasiles		1.4		Psychoactive Drugs		46. 0
**************************************	*****	 *************	******	*****	********	Psychoactive Drugs	****	********

		Ownershi p:		Bed	Si ze:	Li ce	ensure:		
	Thi s	Prop	ori etary	100-	100- 199		l ed	Al l	
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci l	ities
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	83. 3	83. 7	1.00	86. 4	0. 96	87. 0	0. 96	84. 5	0. 99
Current Residents from In-County	83. 5	75. 1	1. 11	79. 8	1.05	69. 3	1. 20	77. 5	1.08
Admissions from In-County, Still Residing	10. 3	18. 7	0. 55	23. 8	0.43	22. 3	0. 46	21. 5	0.48
Admissions/Average Daily Census	275. 9	152. 8	1. 81	109. 7	2. 51	104. 1	2. 65	124. 3	2. 22
Discharges/Average Daily Census	284. 8	154. 5	1.84	112. 2	2. 54	105. 4	2. 70	126. 1	2. 26
Discharges To Private Residence/Average Daily Census	136. 6	59. 1	2. 31	40. 9	3. 34	37. 2	3. 67	49. 9	2.74
Residents Receiving Skilled Care	85. 6	90. 6	0. 94	90. 3	0. 95	87. 6	0. 98	83. 3	1.03
Residents Aged 65 and Older	92. 1	95. 0	0. 97	93. 9	0. 98	93. 4	0. 99	87. 7	1.05
Title 19 (Medicaid) Funded Residents	<b>64</b> . <b>0</b>	<b>65. 4</b>	0. 98	68. 7	0. 93	70. 7	0. 91	<b>69.</b> 0	0. 93
Private Pay Funded Residents	15. 1	23. 2	0. 65	23. 2	0. 65	22. 1	0. 68	22. 6	0. 67
Developmentally Disabled Residents	5. 0	0. 8	6.44	0. 8	6. 50	0. 7	7. 06	7. 6	0. 66
Mentally Ill Residents	36. 0	31.4	1. 14	37. 6	0. 96	37. 4	0. 96	33. 3	1.08
General Medical Service Residents	5. 0	23. 2	0. 22	22. 2	0. 23	21. 1	0. 24	18. 4	0. 27
Impaired ADL (Mean)	<b>57. 0</b>	48. 9	1. 17	49. 5	1. 15	47. 0	1. 21	49. 4	1. 15
Psychological Problems	<b>46</b> . <b>0</b>	44. 1	1. 04	47. 0	0. 98	49. 6	0. 93	50. 1	0. 92
Nursing Care Required (Mean)	7. 3	6. 5	1. 11	7. 2	1.01	7. 0	1. 03	7. 2	1.02